Peggy Ann Milton, McLean County Clerk 104 W. Front Street, Room 704 Bloomington, IL 61701

(309) 888-5190 Fax (309) 888-5932

e-mail: peggyann@mclean.gov website: www.mclean.gov

| | Mcl For the retail sa sp | Pursuant to: Lean County Liquor Conducted for compecting the compection with all event held by a non-production with all even | trol Ordinance sumption on t th a one-day | he premises | | | |
|-----|--|--|---|----------------|-------------|--|--|
| (1) | Name of Organization: | | | | | | |
| (2) | Mailing Address: | | | | | | |
| (3) | Telephone Number:() | | Fax Numl | ber: <u>()</u> | | | |
| (4) | Names, Addresses and Titles of all officers and directors of organization: | | | | | | |
| | NAME | ADDRESS | | TITLE | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| (5) | Description of the One-Day S | Special Event: | | | | | |
| | Type of Event: | | | | | | |
| | Date to be held: | | Hours: | | | | |
| | Location: | | | | | | |
| | Food will be served or available | le (check one) | yes | no | | | |
| (6) | Attach to this Application a Ce Section 31.22 if the McLean C | | | | caph (E) of | | |

Additional Statements by Applicant:

The applicant is not disqualified from receiving a liquor license by reason of any provisions of the laws of the State of Illinois.

The applicant is completely familiar with the terms and provisions of the McLean County Liquor Control Ordinance and with the McLean County Food Services Establishment Ordinance, as amended.

The applicant has/has not made application for a liquor license on the same or other premises which has been either denied, suspended or revoked. If **has**, attach a statement as to the date, place, and reasons therefor.

| IN WITNESS WHEREOF, the undersigned org executed in its name by | | |
|---|--|---|
| executed in its name by its Secreta | ry, thisday of | , 200 |
| | (Exact Organization Title) | |
| | (President or Vice President) | |
| Attest: | | |
| (Secretary or Assistant Secretary) | - | |
| I, | , a Notary Public do hereby certify that on the y appeared before me ng the foregoing document, and being first and duly ent in the capacity therein set forth and declares the | day of who declares y sworn, hat the statements |
| IN WITNESS WHEREOF, I have hereunto set in | my hand and seal the day and year before | written. |
| [SEAL] | (Notary Public) | _ |
| This application shall be accompanied by \$45.00. Make | Check payable to McLean County Clerk. | |
| Issuance of a County license as a result of this applicat | tion does not relieve the applicant from obtainig | a Special Event |

X/Class E Application

License from the Illinois Control Commission.